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DEPARTMENT OF MOTOR VEHICLES
Richmond, Virginia

LICENSE NUMBERS ISSUED

\$10.00 PER PLATE
\$1.00 PER DECAL(S) ONLY

APPLICATION FOR REISSUE OR EXCHANGE OF DEALER/DRIVE AWAY/OFFICE TRAILER PLATES

This application is hereby made for duplicate or substitute license plates.		CHECK APPROPRIATE BOX(S)	
DEALER NAME CERT. NO.		<input type="checkbox"/> REISSUE	<input type="checkbox"/> LICENSE PLATES MO. _____
BUSINESS ADDRESS		<input type="checkbox"/> EXCHANGE OF	<input type="checkbox"/> DECALS YR. _____
		<input type="checkbox"/> LOST <input type="checkbox"/> STOLEN <input type="checkbox"/> DESTROYED <input type="checkbox"/> MULTILATED	
CITY STATE ZIP		LICENSE(S) TO BE REPLACED	EXPIRATION DATE

INSURANCE CERTIFICATION

CHECK ONE BOX

☐ I/We certify that vehicles owned or assigned to my firm are insured by a policy issued through an insurance company licensed to do business in Virginia and that the policy provides at least the minimum amount of coverage as required by law.

☐ A certificate of self insurance # _____ has been issued by DMV pursuant to Section 46.2-368 with respect to each dealer's license plate issued.

NOTE: AUTOMOBILE LIABILITY INSURANCE SHALL BE MAINTAINED ON EACH LICENSE PLATE FOR SO LONG AS THE PLATE REMAINS VALID. Insurance certification is not required for office trailer plates.

I/We certify that all information contained herein is true and correct.

DSD12 (Rev. 12/92)

SIGNATURE MUST BE BY OWNER, PARTNER OR OFFICER

DATE